SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

+ 50 ATE

APPLICATION FOR PERMIT APR 27 2016 Permit #: Date: Amount Paid:

E-8%

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.	Bayfield Co. Zoning Dept.	Refund:	50/16
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT	O APPLICANT.		
TYPE OF PERMIT REQUESTED—> LAND USE SA	☐ SANITARY ☐ PRIVY ☐ CONDITIONAL USE ☐ SPECIAL USE	☐ SPECIAL USE ☐ B.O.A.	A. OTHER
Owner's Name:	Mailing Address: City/State/Zip:		Telephone:
Cosy tecaso	BOLLOW DIMENT BUTTERN / MI/8"	1814	7157773494
Address of Property:	City/State/Zip:		Cell Phone:
89426 Tolar Rd	Banfred / W1 / 5/8/4		115200162
Contractor:	Contractor Phone: Plumber:		Plumber Phone:
	one Guy and Sons	75525	715 269 2230
Authorized Agent: (Person Signing Application on behalf of Owner(s))	Agent Phone: Agent Mailing Address (include City/State/Zip):	include City/State/Zip):	Written Authorization
			Attached See No
DROIFC	PIN: (23 digits)		Document: (i.e. Property Ownership)
LOCATION Legal Description: (Use Tax Statement)	04-046-2-51-04-27-402:00:1200 Volume_	00-1200 Volume 100	Page(s) SM

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Lot(s)

Vol & Page

Lot(s) No.

Block(s) No.

Section

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N, Range

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Lot Size Ć

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LOCATION

Proposed Construction:	Existing Structure					- Automotive to the last	3	n)		Value at Time of Completion * include donated time & material			_ Shoreland →	
ction:	Existing Structure: (if permit being applied for is relevant to it)			Property	□ Run a Business on	☐ Relocate (existing bldg)	☐ Conversion	XAddition/Alteration	□ New Construction	Project			☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage	☐ is Property/Land within 300 feet of River, Stream (incl. internition) Creek or Landward side of Floodplain? If yes—continue —▶
	or is relevant to it)			☐ Foundation	☐ No Basement	Basement	☐ 2-Story	X 1-Story + Loft	☐ 1-Story	# of Stories and/or basement		If ye	n 1000 feet of Lake, Pon	of Floodplain? If ye
Length: 500	Length: Sy							X Year Round	Seasonal	Use	B - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	If yescontinue ->	d or Flowage	Stream (ind. Intermittent) If yescontinue
					□ None		П 3	_ Z	1	# of bedrooms			Distance Stru	Distance Stru
Width: 36	**************************************		□ None	□ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	☐ Sanitary (Exists) Specify Type:	New) Sanitary Spec	☐ Municipal/City	What Type of Sewer/Sanitary Syste Is on the property?	MINISTER MINISTER AND	feet	Distance Structure is from Shoreline:	Distance Structure is from Shoreline : feet
Height: (3)	Height:			All Market	ntract)	ulted (min 200 gallo	ofy Type:	ify Type:		pe of ary System roperty?	4	No	_ □ Yes	Is Property in Floodplain Zone?
	œ,	Company of the Company		·		1)(r		& Well	☐ City	Water		No	_□ Yes	Are Wetlands Present?

Proposed Use	□ ⟨	Proposed Structure Proposed Structure	Dimensions
e internalista en esta de de servicio de la composición del composición de la composición de la composición del composición de la composición de la composición de la composición de la composición del composición de la composición del composición de la composición del composición de la composición de la composición de		Principal Structure (first structure on property)	
		with Loft	
X Residential Use		with a Porch	
,		with (2 nd) Porch	
		with a Deck	
		with (2 nd) Deck	
☐ Commercial Use		with Attached Garage	
		Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	ilities) (
		Mobile Home (manufactured date)	
	×	Addition/Alteration (specify) MUSI FORM & PORCH PARE	
Municipal Use		Accessory Building (specify)	
Hec'd for Issuance		Accessory Building Addition/Alteration (specify)	
	- 3		
		Special Use: (explain)	
000000000000000000000000000000000000000		Conditional Use: (explain)	
OU COLL		Other: (explain)	

I (we) declare that this application (inc am (are) responsible for the detail and may be a result of **Bayfield County** re above described property at any reaso FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES application (including any accompanying information) has been examined by me (us) and to the bast of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) or the detail and accuracy of all information I (we) and ere) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which yield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the error and representation.

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(If you are signing on behalf of the owner(s) a letter of authorization accompany this application)

Authorized Agent:

Address to send permit

Date

Date

Attach

Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Setback from the North Lot Line
Setback from the South Lot Line
Setback from the West Lot Line
Setback from the East Lot Line TURNE RA In the box below Draw or Sketch your Property (regardless of what you are applying for) Prior to the placement o one previously surveyed Setback to Privy (Portable, Composting)

Prior to the placement or construction of a structure within ten (10) feet of the minimum re other previously surveyed comer or marked by a licensed surveyor at the owner's expense. Setback to Septic Tank or Holding Tank
Setback to Drain Field Setback from the Issuance Information (County Use Only) Permit Denied (Date): Granted by Variance (B.O.A.) Please is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Condition(s): Town, Committee or Board Conditions Attached? Date of Inspection: ¿ Hold For Sanitary: Signature of Inspector Was Parcel Legally Created
Was Proposed Building Site Delineated complete (1) -- (7) above (prior to continuing) (1) (2) (3) (4) (5) (6) Record: 8 ent or consti Show any (*): Show any (*): Show: Show / Indicate: Show Location of (*): Show Location of: Setbacks: (measured to the closest point) Centerline of Platted Road Established Right-of-Way Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be Description NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code
The local Town, Village, City, State or Federal agencies may also require permits. Case #: ☐ Yes☐ Yes☐ Yes☐ Hold For TBA: マスシ ういこと S. Proposed Construction
North (N) on Plot Plan
(*) Driveway and (*) Frontage Road (Name Frontage Road)
All Existing Structures on your Property
(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
(*) Wetlands; or (*) Slopes over 20% ∯Yes □ Yes (Deed of Record) (Fused/Contiguous Lot(s)) K. □ No 2 Sanitary Number: Reason for Denial: Permit Date: inspected by: um required setback, the bou ∏ Yes E TY TY 327 4 Hold For Affidavit: NO NO Feet Feet Feet Feet Feet Feet * 1 <u>\$</u> (If No they need to be attached.) 16.000 V たらいできた O Mitigation Required Mitigation Attached Previously Granted by Variance (B.O.A.) Setback from the Lake (ordinary high-water mark)
Setback from the River, Stream, Creek 6 ndary line from which the setback Setback to Well 20% Slope Area on property
Elevation of Floodplain Setback from Wetland Setback from the Bank or Bluff Were Property Lines Represented by Owner
Was Property Surveyed 177 TANSOR! Changes in plans must be approved by the Planning & Zoning Dept. 722 # of bedrooms: 0 Hold For Fees: □ Yes Description CV ₹ 8 8 Case #: 7 Affidavit Required Affidavit Attached □ Yes Sanitary Date: Lakes Classification Zoning District : Date of Re-Inspection: Date of Approval: Yes Measurement TO TO THE PARTY OF Yes Yes DUN. carner to the D A A anserver. N C Feet S O O Feet Feet Feet Feet

SUBMIT: COMPLETED APPLICATION, TAX STAJEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

BAYFIELD COUNTY WISCONSIN APPLICATION FOR PERMIT

ENTERED Permit #: Amount Paid: 53% 16-68-38

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182016

Refund:

Secretarial Staff C Other: (explain) DURIST ROMING TOUSE DEPOLITIES IN PENALTIES			Rec'd for Issuance	5	☐ Municipal Use				-		neside illa osc				Proposed Use	Proposed Construction:	Existing Structure: (If permit being applied for is relevant to it)		Pro	□ Ru	1000 1	ر Ad	F .	Value at Time of Completion * include donated time & material	X Non-Shoreland		☐ Shoreland — Cree	SIC	Section 77	24/4, 54				Authorized Agent: (Person Sig	>	33095 Litte	Nilderness	Owner's Name:
Other	Condi		Г	_			-	and designation of the second					☐ Reside		•	-	ermit being applie		Property	☐ Run a Business on	☐ Conversion ☐ Relocate (existing bldg)	Addition/Alteration	New Construction	Project (What are you applying for)		Property/Land Wi	k or Landward sic	Property/Land wi	Township 57	1/4	Scar Brief	- 1	3	(Person Signing Application on behalf of Owner(s))	Ì	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	S Induit	25
: (explain)	tional Use: (explain)	Special Use: (explain)	Accessory building Addition/ Alice attori (Specify)	Accessory building (specify)	3	Mobile Home (manufactured date)	Bunkhouse w/ (☐ sanitary, or 🌣 sleeping quarters, or	with Attached Garage	with (2 nd) Deck	with a Deck	with (2 nd) Porch	with Loft	Residence (i.e. cabin, hunting shack,	Principal Structure (first structure on property)			d for is relevant to it)		☐ Foundation	ZS.	☐ 2-Story		×	8 9		Is Property/Land within 1000 reet of Lake, Pond of Flowage If yes—continue	de of Floodplain?	er, c	N, Range 66 W			PII			CO	<u>D</u>	yes executive-	Mailing Mailing
EST ROY		177	II) Aite attor (specify	(V)	fy)	date)	or 🕅 sleeping quarters,	Garage	· · · · · · · · · · · · · · · · · · ·		- Samuel Control of the Control of t	***	ng shack, etc.)	ructure on property)	Proposed Structure	Length: 40'						-	Ş	•		If yescontinue	If yes—continue—	Stream (incl. Intermittent)	Russell	Call	CSM Vol & Page	<u>4</u> : (23 digits)	401	Agent Phone: A	>	Donated N	AK	Address:
TA TO	*		1			- Linkstein	or Cooking &	Circ	- Andrew Control of the Control of t		- Philipping	AT THE PERSON NAMED IN COLUMN TWO			re .					M None	U.	1		10	TANK PURI	Cistaire Structure	300	Distance Structure	2		Lot(s) No.	•		gent Mailing Ado	Plumber:	1 54814	8 3	City/State/
		A A PARTY OF THE P	To play and a second se	1444A	***************************************	Table 1	food prep facilities)	mar Yest			5 HH H H H H H H H H H H H H H H H H H	The second state of the se	The state of the s	A de principal de la companyone de la co		Width: \$5 '	;	None	1.	Portable (w/service contract)	Privy (Pit) or Vaulted (mi	(New) sanitary		Sewe Is o		fee	time is from Shore	ture is from Shoreline:			Block(s) No.	9	-	Agent Mailing Address (include City/State/Zip):			MINNEAPOLIS	Zip:
a	_			- -	-	-	7 (2)	-		1	+	-							ilet ∂√	service c	or Va	ary spe	1	What Type of ar/Sanitary Syon the propert		feet	feet	ine:	9710 101		Subdivision:	Recorde		ate/Zip):			2	100
h	×	×		×	×	×	1	-	X)	×)	×	×	X)	x)	Dimensions	Height:	Height:		13+100	ontract)	Vaulted (min 200 gallon)		, T	What Type of Sewer/Sanitary System Is on the property?	A CONTRACTOR OF THE CONTRACTOR	No	Floodplain Zone?	Is Property in			ion:	d Document: (i.e.	Atta		Plumbe	072	554)4 (212 (07)	Tele
					1		206		Velocity						Square Footage	J	1				llon)	□ Weil	□ City	Water		□ No		≥	20.40	Labella and the second and the secon	Pagets)	Property Ownership)	No No	Written Authorization	Plumber Phone:	2024510	ione:	one:

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE N 5544 Owner(s): (If there are Multiple

Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent:

(If you are signing on behalf of the ow

r(s) a letter

of authorization must accompany this application)

Date

Date

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Address to send permit

808

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Re

Minneapolis

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Attach
Copy of Tax Statement
sed the property send your Recorded Deed

See attached

2 pages)

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

			Feet	38c	Setback to Privy (Portable, Composting)
			Feet		Setback to Drain Field
Feet	W 00 0	Setback to Well	Feet	380	Setback to Septic Tank or Holding Tank
				-	
Feet	Car Car	Elevation of Floodplain	Feet		Setback from the East Lot Line
Feet	3	Setback from 20% Slope Area	Feet	017	Setback from the West Lot Line
Feet	1,250	Setback from Wetland CREEK	Feet	258	Setback from the South Lot Line
			Feet	360	Setback from the North Lot Line
Feet	NA.	Setback from the Bank or Bluff		7.,	
Feet	1250	Setback from the River, Stream Creek	Feet	. (Setback from the Established Right-of-Way
Feet	0 mm / n	Setback from the Lake (ordinary high-water mark)	Feet	360 Feet	Setback from the Centerline of Platted Road
ent	Measurement	Description	nt	Measurement	Description

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

B-0183 NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code
The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	# of bedrooms: Sanitary Date:	
Permit Denied (Date):	Reason for Denial:		
Permit # 16-0079	Permit Date: 5-3-16		
Is Parcel a Sub-Standard Lot	ous Lot(s)) No Mitigation Required Mitigation Attached	□ Yes \□No Affidavit Required □ Yes No Affidavit Attached	d □Yes ☑No d □Yes ☑No
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:	Previously Granted by Variance (B.O.A.	y Variance (B.O.A.) Case #:	
Was Parcel Legally Created Syes □ No Was Proposed Building Site Delineated Yes □ No	Were Property Line	Were Property Lines Represented by Owner	Q No D-465
Inspection Record: JUNEX IS PROPOSED IN A DICATURY INTERVAL JUNEX DICETOR JUNEX IS PROPOSED IN A DICATURY INTERVAL JUNEX DICETOR	S 40 Previous IN CUP		Zoning District (RPB)
Date of inspection:	had? Tyes Two-lif No they need to be after		Date of Ne-Hisperiolity Styles
Condition(s): 1 own, Committee or Board Conditions Attached? 11 Yes 11 No + (IN No they need to be attached.) + And 17 = 45 + 61 - 17 = 18 + 18 + 18 + 18 + 18 + 18 + 18 + 18	striown, Committee or Board Conditions Attached, ITYPES IN No + IF No they need to be attached.) 「大元式子小の) つけら、アモ・Mitty サクル INSPECTIONS、分析	P INSPECTIONS.	が表え
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